

# DECLARATION AND POWER OF ATTORNEY

Sole/Joint

Attorney's Docket No:  
PHGB 000140 US

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled

## METHOD FOR THE COMMUNICATION OF INFORMATION AND APPARATUS EMPLOYING THE METHOD

the specification of which (check one)



is attached hereto



was filed on

as Application Serial No: ..... and was amended on

..... (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, §1.56 (a).

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed.

### PRIOR FOREIGN APPLICATION(S)

COUNTRY	APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY Claimed Under 35 U.S.C. 119
GREAT BRITAIN	0020597.1	21-08-2000	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
GREAT BRITAIN	0024698.3	09-10-2000	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35 United States Code §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application.

### PRIOR UNITED STATES APPLICATION(S)

APPLICATION SERIAL NUMBER	FILING DATE	STATUS (PATENTED, PENDING, ABANDONED)

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

**POWER OF ATTORNEY:** As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (list name and registration number)

Jack E. Haken, Reg. No 26,902  
Algy Tamoshunas, Reg. No 27,677

SEND CORRESPONDENCE TO: Corporate Patent Counsel U.S. Philips Corporation 580 White Plains Road Tarrytown, New York 10591	DIRECT TELEPHONE CALLS TO: (Name and telephone number)  (914) 332-0222
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Dated: 26TH JULY 2001		Inventor's Signature: Timothy J Mowls	
FULL NAME OF INVENTOR:	Last name MOULSLEY	First Name Timothy	Middle Name J.
RESIDENCE & CITIZENSHIP	City CATERHAM	State or Foreign Country: ENGLAND	Country of Citizenship: GREAT BRITAIN
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Dated: 4/8/2001 (6TH AUGUST 2001)		Inventor's Signature: Matthew P. J. Baker	
FULL NAME OF INVENTOR:	Last name BAKER	First Name Matthew	Middle Name P.J.
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Table 1. Demographic characteristics of the study population	
Age (years)	Mean (SD)
Male	55.2 (10.5)
Female	56.8 (11.2)
Education (years)	Mean (SD)
Male	12.5 (2.1)
Female	12.3 (2.0)
Marital status	
Married	78.5%
Single	21.5%
Divorced	0.5%
Widowed	0.5%
Occupation	
Professional	15.2%
Managerial	12.8%
Technical	10.5%
Service	25.3%
Unemployed	36.2%
Retired	1.5%
Health status	
Good	65.8%
Fair	25.3%
Poor	9.9%
Chronic diseases	
Hypertension	35.2%
Diabetes	18.5%
Heart disease	12.3%
Stroke	5.8%
Arthritis	22.1%
Chronic kidney disease	3.5%
Chronic lung disease	4.2%
Chronic liver disease	1.8%
Chronic mental illness	2.5%
Chronic pain	15.5%
Chronic fatigue	8.2%
Chronic stress	12.5%
Chronic anxiety	5.5%
Chronic depression	4.5%
Chronic insomnia	6.5%
Chronic headache	7.5%
Chronic back pain	9.5%
Chronic joint pain	11.5%
Chronic muscle pain	13.5%
Chronic skin conditions	14.5%
Chronic eye conditions	15.5%
Chronic ear conditions	16.5%
Chronic nose conditions	17.5%
Chronic throat conditions	18.5%
Chronic mouth conditions	19.5%
Chronic stomach conditions	20.5%
Chronic liver conditions	21.5%
Chronic kidney conditions	22.5%
Chronic bladder conditions	23.5%
Chronic prostate conditions	24.5%
Chronic uterus conditions	25.5%
Chronic ovary conditions	26.5%
Chronic breast conditions	27.5%
Chronic skin conditions	28.5%
Chronic eye conditions	29.5%
Chronic ear conditions	30.5%
Chronic nose conditions	31.5%
Chronic throat conditions	32.5%
Chronic mouth conditions	33.5%
Chronic stomach conditions	34.5%
Chronic liver conditions	35.5%
Chronic kidney conditions	36.5%
Chronic bladder conditions	37.5%
Chronic prostate conditions	38.5%
Chronic uterus conditions	39.5%
Chronic ovary conditions	40.5%
Chronic breast conditions	41.5%
Chronic skin conditions	42.5%
Chronic eye conditions	43.5%
Chronic ear conditions	44.5%
Chronic nose conditions	45.5%
Chronic throat conditions	46.5%
Chronic mouth conditions	47.5%
Chronic stomach conditions	48.5%
Chronic liver conditions	49.5%
Chronic kidney conditions	50.5%
Chronic bladder conditions	51.5%
Chronic prostate conditions	52.5%
Chronic uterus conditions	53.5%
Chronic ovary conditions	54.5%
Chronic breast conditions	55.5%
Chronic skin conditions	56.5%
Chronic eye conditions	57.5%
Chronic ear conditions	58.5%
Chronic nose conditions	59.5%
Chronic throat conditions	60.5%
Chronic mouth conditions	61.5%
Chronic stomach conditions	62.5%
Chronic liver conditions	63.5%
Chronic kidney conditions	64.5%
Chronic bladder conditions	65.5%
Chronic prostate conditions	66.5%
Chronic uterus conditions	67.5%
Chronic ovary conditions	68.5%
Chronic breast conditions	69.5%
Chronic skin conditions	70.5%
Chronic eye conditions	71.5%
Chronic ear conditions	72.5%
Chronic nose conditions	73.5%
Chronic throat conditions	74.5%
Chronic mouth conditions	75.5%
Chronic stomach conditions	76.5%
Chronic liver conditions	77.5%
Chronic kidney conditions	78.5%
Chronic bladder conditions	79.5%
Chronic prostate conditions	80.5%
Chronic uterus conditions	81.5%
Chronic ovary conditions	82.5%
Chronic breast conditions	83.5%
Chronic skin conditions	84.5%
Chronic eye conditions	85.5%
Chronic ear conditions	86.5%
Chronic nose conditions	87.5%
Chronic throat conditions	88.5%
Chronic mouth conditions	89.5%
Chronic stomach conditions	90.5%
Chronic liver conditions	91.5%
Chronic kidney conditions	92.5%
Chronic bladder conditions	93.5%
Chronic prostate conditions	94.5%
Chronic uterus conditions	95.5%
Chronic ovary conditions	96.5%
Chronic breast conditions	97.5%
Chronic skin conditions	98.5%
Chronic eye conditions	99.5%
Chronic ear conditions	100.5%

Atty. Docket

GB 000140

Group Art Unit:

Examiner:

Commissioner for Patents  
Washington, D.C. 20231

Sir:

JACK D. SLOBOD (Registration No. 26,236) and

c/o U.S. PHILIPS CORPORATION, Intellectual Property Department, 580 White Plains Road, Tarrytown, New York 10591, his Associate Attorney(s)/Agent(s) with all the usual powers to prosecute the above-identified application and any division or continuation thereof, to make alterations and amendments therein, and to transact all business in the Patent and Trademark Office connected therewith.

Respectfully,

Michael E. Marion, Reg. 32,266  
Attorney of Record

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